STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 19 2017

PLEASE PRINT

I. Name of Lobbyist((s)	Barr	ett	M.	Chr	istiv	19	DE	NEW HA	MPSHIRE NT OF STAT
II. Name of lobbyist'	s partnersb	ip, firm or	cornors	ation, if a	1V:		•			
NH	Schoo	-	art 5	1	 <u>Socia</u>	Lina				
	ne of partners	hip, firm or c	orporation	on)						
22 TV	iangle	Vark	Dr	iv ,	Suite	101	(on(e	3rc	WH	03301
Business Address: (St	reet)		(Tov	vn/City)			tate)		(Zip Co	de)
(663 The state of	19 61	()	(Fax)		_ e-mail _				
III. This statement co							OR you ma	ay file	a separat	e report for
reportable expense t	ransactions	which are	uot attr	idutable i	о апу опе	chent).				
☐ All reportable tran	sactions occ	urring in the	e month	s prior to	the reporti	ng date re	lative to th	e follo	wing clien	ıt:
NH	School	Ba	2 frue	A	ssar io	ton				
	(Full Name	of Client as	it appear	s on the Lo	bbyist Regi	istration Fo	orm)			
<u>OR</u>										
All reportable transunrelated to any partic		he lobbyist	(includi	ng the lob	byist's fan	nily), or t	he lobbying	g firm l	listed belo	w which are
manufacture and parties										
IV. Date of Report	April 26,					uly 26, 20				
Reports cover: activ	ity from date	_	on to 3/3	1/17			7 to 6/30/17	•		
	October 2 activity from	25, 2017 🗒 7/1/17 to 9/3	80/17				, 2018 🗌 /17 to 12/31.	/17		
	wenter, grom	7111110715	.0,17		uci.,,,	<i>jrom</i> 10/1	11, 10 12, 31	, 1 ,		
V. There have been If this box is checked, Concord, NH 03301.										
VI. Check if addition	ial reports a	re attached	j :							
If you have receiv	-			ou must f	ile Adden	dum A– l	Fees and E	xpense	s	
☐ If you have paid a Expense Reimbursem		m or reimbu	irsed ex	penses, yo	u must file	e Addend	lum B – Re	port of	f Honorarii	ums or
☐ If you, your firm,		ily has made	e politic	al contrib	utions, you	ı must file	e Addendu	ım C–	Political C	Contributions
• .•	·		•		•					
Sworn Statement/Af	firmation by	y Lobbyist	1 DCA	224 d t.	1	cc -	4lm a 4 4lm a 4	£	·	ation is turn
I have read RSA 15, F and complete to the be					ereby swea	ar or alth	m mai me i	torego	ing miorm	ation is true
Bruth	۲. (۲۲	t "				4.1	1.101	4		
(Signature of lobbyis	t)	•				, ,	(Da	te)		
Rosett	M M	L.					•	•		
(Print Name of Johns	rict)	AN JEWI	<u> </u>							

P L E A S E P R I N

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

(Name of partn	ership, firm or corpor	,	Association	Date		
IV. Fees Received Indicate the gross amount of a to lobbying, including fees fo including research, monitorin reduced by any expenses:	r services such a	s public adv	ocacy, government	relations	, or public	relations s
a) Total of all fees received in	this reporting pe	eriod		a) \$	11,25	0. 20
b) Total of all fees received t (This should equal the total				b) \$ _ear)	11,75	0,20
c) Total of all fees received to (Add lines a and b)	o date			c) \$	11, 25	C4.0
d) Indicate the amount of any yet been paid	such fees that ar	re due, but h	ave not	d) \$_	/	
V. Expenses: Lobbyist(s)/Lobbying partners fees. Separate reports are to the lobbyist(s)/firm that are Expenses are to be reported during the reporting period for individual expenses where the lunch where the cost was \$25 being lobbied, purchase of a coopen to covered by	be filed for expe- unrelated to any in one of three co- or salaries, benef- e expenditure wa .00 or less, purch peremonial object ach individual ex	nditures made one client categories of its, support s of \$25.00 hase of a per t given to a penditure made one of the categories of a penditure made of a penditure made one of a penditure of a	de relative to each of a separate report in expenses: (a) the staff, and office experience or less (for example with a value of lesperson being lobbie ade during this repo	lient and hay be fi aggrega penses; (e: meals is than \$1 d with a rting peri	if expendided for the tetal of (b) the agg purchased (0) that is givalue of \$2 od of great	tures are me lobbyist(sall expense regate total during a biven to the control of

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.

c) Total of all itemized expenditures reported in detail in section VI.

c) \$

restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political

contributions will be reported on separate addendums and should not be reported on Addendum A.

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$(\$ <i>O</i>
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	ns_150
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
4	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
Saut U. Unt	4.11.2017
(Signature of lobbyist)	(Date)
Barrett M. Chistma	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

	ffirmation by Lobby e and Expenses for:	•		
Name of Lobbying par	tnership, firm, or corpo	oration: NH SJ	nool Boards	Association
Name of Client (leave particular client):	blank if Statement is fo	or the partnership, firm, or	corporation and not	related to any
Date of Report (check	one):			
April 26, 2017	July 26, 2017 □	October 25, 2017 🗆	January 31, 2018	
I have read RSA 15, F the following Addend submitted):	RSA 15-B, RSA 664, the things submitted with the	he Statement of Income a at Statement (insert the n	nd Expenses describe umber of Addendum	ed above, and forms being
Addendum A(s).			
Addendum B(s				
Addendum C(s	3).			
	my knowledge and bel		nt and each Addendu 4. (1. 1017 (Date)	m is true and
	M. Chisting		(2)	